

# The Fair Care Act of 2022

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The Fair Care Act was diligently crafted with more than 75 bipartisan provisions, input from policy experts and multiple congressional offices. With the two goals of increasing those covered by health insurance and lowering the overall cost of health care, this legislation brings both commonsense and innovative solutions to a complex health care problem.

## Quick Facts

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- ✓ Increases the number of insured individuals
- ✓ Protects those with pre-existing conditions
- ✓ Ensures affordable coverage for those who need it most
- ✓ Simplifies and expands tax-free contribution towards medical expenses
- ✓ Promotes transparency and fair practices in all forms of health care
- ✓ Lowers the cost of prescription drugs, premiums, and health care services
- ✓ Brings modern solutions to health care in a post-COVID-19 world

## Major Reforms

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### Health Savings Accounts

- Consolidates HSAs, FSAs, MSAs and HRAs to one pre-tax spending account
- Expands the use of pre-tax dollars to cover more expenses, including insurance premiums and direct primary care arrangements

### Hospitals, Providers, and Insurers

- Promotes transparency by publishing provider networks and prices for common services
- Requires timely, transparent bills to be sent to patients
- Discourages hospital consolidation and anti-competitive behavior
- Protects rural hospitals from closures
- Reforms costly litigation surrounding medical malpractice lawsuits

### Prescription Drugs and PBMs

- Modernizes approval process to bring safe, effective medicine to patients quicker
- Promotes generic drug approval and uptake
- Lowers drug costs through limiting exclusivity and increasing transparency
- Reforms PBM practices including eliminating DIR fees

### Telehealth

- Expands the number of health professionals that can provide telehealth services
- Eases geographic limitations for mental health services and those furnished at FQHCs and RHCs

### Preexisting Conditions

- Codifies Affordable Care Act preexisting condition protections in HIPAA should the Supreme Court rule the ACA unlawful
- Offers greater protections through an “Invisible Guaranteed Coverage Risk Pool” and guaranteed coverage Medigap plans

### Private Health Insurance

- Promotes Association Health Plans (AHPs) and Short-Term Limited Duration Insurance (STLD) for more affordable coverage options
- Eliminates the employer health insurance mandate and allows those with ESI offers to receive premium assistance
- Strengthens and increases enrollment in the commercial marketplace through waivers
- Increases premium assistance eligibility and expands assistance for more coverage options

### Medicare and Medicaid

- Modernizes Medicare enrollment through a competitive bidding process which promotes Medicare Advantage plans
- Redesigns Part D to eliminate the coverage gap and reduce out-of-pocket costs for seniors
- Establishes a flexible Medicaid funding option for states
- Closes the gap between Medicaid eligibility and premium assistance in the individual market
- Promotes fiscal accountability and solvency for both programs

**Title I:** Medisave | **Title II:** Improving Private Health Insurance

**Title III:** Competition, Transparency and Accountability | **Title IV:** Medicare and Medicaid Reforms

